## 2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

## SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # B02000000431 07 FEB 12 AM 9: 28 TAMPA BAY GROUND LEASE SECOND TIER LIMITED PARTNERSHIP Principal Place of Business Mailing Address 270 COMMERCE DRIVE 270 COMMERCE DRIVE ROCHERSTER, NY 14623 ROCHERSTER, NY 14623 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 Chg-LP CR2E003 (12/06) City & State City & State 4. FEI Number Applied For 74-3073527 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 13. DOCUMENT # F02000006386 STREET ADDRESS TAMPA BAY GROUND LEASE SECOND TIER GENERAL 270 COMMERCE DRIVE PARTNER CORPORATION STREET ADDRESS 270 COMMERCE DRIVE City-St-7P CITY-ST-ZIP ROCHERSTER, NY 14623 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADURESS 000088446310 02/15/07--01038--005 \*\*\$00.00 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT / STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes Tampa Bay Ground Pease Second Tier General Partner Corporation

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER WILLIAM SONDETICKET

Vice President

FILLU